Frewsburg Central School
Official's Claim Form

Claimant Name & Address

_____
_____
_____
_____
_____

_____ - _____ - _____
(Social Security #)

Sport: _____
(Boys/Girls Varsity/JV)

Opponent: _____

Date: _____

Total Amount: $_____

This is to certify that the work, labor, services, material and supplies charged in the above account or claim and included in the same amounting to $_____have been actually preformed for, furnished and/or delivered to Frewsburg Central School; that said claim is just, due and unpaid, and that there are no offsets against the same; that the items and specifications therein are correct; that the sums charged are reasonable and just; that no payment has been made onto in such account or claim.

Vendor Number:_____

Account Code	Amount

OFFICIAL'S STATEMENT AND WAIVER

I,_____, hereby state that:

I have been fingerprinted and cleared under S.A.V.E. Legislation, and I am certified and eligible to officiate an athletic contest today in Frewsburg Central School District.

_____ _____, 20_____
(Signature of Official) (Date)

APPROVAL OF SCHOOL OFFICIAL: *I hereby certify that this claim has been rendered in accordance with the contract, agreement, or accepted estimate, and that the work has been completed and/or the materials delivered in satisfactory condition.*

_____ _____, 20_____
(Signature of Coach) (Date)

_____ _____, 20_____
(Signature of Athletic Director) (Date)

Revised 9/2014